Inst. Number: 202312009235 Book: 1491 Page: 201 Page 1 of 1 Date: 5/23/2023 Time: 3:36 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
31-3S17-06129-000 (26248)	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is proven the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the following information is proven the following information in the fol	ents will be made to certain real property, and in accordance with Section 713.13 yided in this <b>NOTICE OF COMMENCEMENT</b> .
1. Description of property (legal description): ALLLOT 5.8.TI a) Street (job) Address: 1276 NW Dilian Ln. Lake City.	HE W 45 FT OF LOT 4 BLOCK 2 HOLLIDAY HEIGHTS REPLAT. 496-442, PB 1176-1066, PB 1192-403, WO 1192-1624 WD 1261-2302, DC 1462-1261,
	, acess, etcreplacements and repairs in accordance with Columbia County ARPA Program.
Owner Information or Lessee information if the Lesse     a) Name and address: Almeda Strawder: 1276 NW Dillian Let	e contracted for the improvements: ). Lake Cily, FL 32055
<ul> <li>b) Name and address of fee simple titleholder</li> <li>c) Interest in property Homeowner</li> </ul>	(if other than owner) N/A
4. Contractor Information	
a) Name and address: Patriot Response Group: 2770 b) Telephone No.: 850-698-8893	) Indian River Blvd. #501 Vero Beach, FL 32950
5. Surety Information (if applicable, a copy of the payme	ent bond is attached):
a) Name and address: N/A b) Amount of Bond: N/A	
c) Telephone No.: N/A	
6. Lender	olumbia County ARPA Senior Housing Rehab Program: 135 NE Hernando Ave, #203: Lake City, FL 32055
a) Name and address: Columbia County BCC do Co b) Phone No. 386-719-2028	oldinion Sounty ANTA Senior Flousing Nethab Flogram, 155 NE Flethando AVE, #203. Lake City, FE 32000
	er upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes:  a) Name and address: Columbia County Purchasing: Eric	ca Jones 135 NE Hernando Ave. #203: Lake City. Fl. 32055
b) Telephone No.: 386-719-2028	
Section 713.13(I)(b), Florida Statutes:	e following person to receive a copy of the Lienor's Notice as provided in
a) Name: Antonio Jenkins	OF Guardian CRM, Inc. 15000 Citrus Country Dr. #331: Dade City, FL 33523
b) Telephone No.: 888-482-7393	
<ol> <li>Expiration date of Notice of Commencement (the exp is specified):</li> </ol>	iration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROF FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	PE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, JR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A DRDED AND POSTED ON THE JOB SITE BEFORE THE FIRST UNCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	1. 13 @
COUNTY OF COLUMBIA 10	Analo Rope Shawton ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Signature of Own	omeowner@ImedaPope.StrandCl
P	rinted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me,	by means of physical presence or online notarization, a Florida Notary,
this 22nd day of May , 20 23	by: Mulu Shin bas Homeowner  (Name of Person) (Type of Authority)
	who is personally known OR produced identification
(name of party on behalf of whom instrument was ex	kecuted)
	Type ID.
	ANTONIO JENKINS
Notary Signature	Notary Public-State of Florida
	My Commission Expires November 02, 2025